



RECEIVED
CENTRAL FAX CENTER

**North America
Intellectual Property Corporation**

FEB 21 2005

P.O. BOX 506, Merrifield, VA 22116, U.S.A.

Voice Mail: 302-729-1562

FAX: 806-498-6673

e-mail: winstonhsu@naipo.com

Customer No.: 27765

Fax To: Toan Le
Art Unit: 2863

Tel.: (571) 272-2276
Fax: (703) 872-9306
(571) 273-2276

From : Winston Hsu, Registration No. 41,526

Serial No.: 10/604,244

Attorney Docket No.: LKSP0017USA

Subject: Authorization to Act in a Representative Capacity

Total Pages: 2 pages (including cover page)

Winston Hsu 2005/02/21

NAUP0469USA0_A2_2

Sample Form (09-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of:
Hung-En Tai, Haw-Jyue Luo

Application No.
10/604,244

Filed:
07/03/2003

Title: METHOD FOR ANALYZING IN-LINE QC TEST PARAMETERS

Attorney Docket No.	Art Unit:
LKSP0017USA	2863

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
Scott Margo	56,277

This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

SIGNATURE of Practitioner of Record

Signature	<i>Winston Hsu</i>	Date 02/21/2005
Name	Winston Hsu	Registration No., if applicable 41,526
Telephone	302-729-1562	

This form offers a sample or suggested format for an authorization for an agent. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.